



Individual & Family Dental Plans

Delta Dental of North Carolina

WHO IS ELIGIBLE?

Any North Carolina resident can enroll. Membership is open to all North Carolina residents and their eligible dependents. If you have been covered by a Delta Dental of North Carolina individual or family policy and drop coverage, you are not eligible to re-enroll for 12 months.

WHEN DOES MY COVERAGE BEGIN?

Your coverage begins on the first day of the month following the day we receive your application and initial premium. The initial coverage period is for 12 months and we guarantee not to change your premiums during the coverage period. The policy and your coverage will terminate due to nonpayment of the premium or upon a member's written request.

Waiting periods may apply.

WHAT IS THE WAITING PERIOD?

Waiting periods vary by plan. There are no waiting periods on preventive or diagnostic services.

Please refer to the benefit chart for the waiting periods that apply to each plan.

Affordable oral health care for you and your family.

Delta Dental is the premier dental benefits provider locally and nationally. With the **largest network of dentists**¹, Delta Dental of North Carolina provides the **broadest access to the most affordable oral health care** to families and individual customers.

157,000+ participating dentists nationwide²

80 Million+ Americans covered²

36% more in-network dentists in NC than our closest competitor²

COMMUNITY FOCUS

As a not-for-profit, a portion of our residual at the end of each year goes back into our communities. Our programs provide oral health services and education to underserved children and families across the state.

120 signs & symptoms of non-dental diseases can be detected through an oral exam⁴



- 1. Netminder; September 2019
- 2. Delta Dental internal data, 2019
- 3. Academy of General Dentistry, "Dental Care and Oral Health Information You Need," web.
- James W. Little et al., Dental Management of the Medically Compromised Patient (St. Louis: Mosby, 2012).

ORAL HEALTH'S IMPACT ON OVERALL HEALTH

Oral health has a direct impact on your overall health. **Routine dental exams can detect the first warning signs for 90% of all systemic diseases,** including heart disease, diabetes and even cancer³.

Choosing the plan that's right for you and your family.

With Delta Dental of North Carolina's individual and family plans, it's easy to get the coverage you need to protect your health - and your wallet. Here are some things to consider when choosing your plan:

EVALUATE YOUR NEEDS

A single adult under the age of 30, with very good dental health and no history of oral disease, has very different dental benefit needs than an individual with a history of extensive oral health issues or even a family of four. Be sure to determine your specific dental needs when finding a plan that's right for you.

UNDERSTANDING OUR DIFFERENT NETWORKS

Delta Dental PPO Network[™] Lowest out-of-pocket costs

Delta Dental Premier Network®

Higher out-of-pocket costs than Delta Dental PPO™, but may be lower than a nonparticipating dentist

You are free to visit any licensed dentist, but if you visit an out-of-network dentist you may have the highest out-of-pocket costs.



DELTA DENTAL BENEFITS

	Preventive Plan		Enhanced Plan			Premium Plan			
Network Type	PPO	Premier	Out of	PPO	Premier	Out of	PPO	Premier	Out of
Diagnostic and Preventive	Dentist	Dentist	Network*	Dentist	Dentist	Network*	Dentist	Dentist	Neţwork*
Diagnostic and Preventive Services-exams, cleanings, fluoride, and space maintainers	100%	90%	90%	100%	90%	90%	100%	90%	90%
Emergency Palliative Treatment-to temporarily relieve pain	100%	90%	90%	100%	90%	90%	100%	90%	90%
Sealants-to prevent decay of permanent teeth	100%	90%	90%	100%	90%	90%	100%	90%	90%
Brush Biopsy-to detect oral cancer	100%	90%	90%	100%	90%	90%	100%	90%	90%
Radiographs-X-rays	100%	90%	90%	100%	90%	90%	100%	90%	90%
Basic and Major Services							_		
Minor Restorative Services-fillings and crown repair	50%	40%	40%	70%	Basic Services 65%	65%	80%	Basic Services 70%	70%
Simple Extractions-non-surgical removal of teeth	50%	40%	40%	70%	65%	65%	80%	70%	70%
Other Basic Services-misc. services	Not Covered		70%	65%	65%	80%	70%	70%	
Oral Surgery Services-extractions and dental surgery		Not Covered		70%	65%	65%	80%	70%	70%
Periodontal Maintenance-cleanings following periodontal therapy		Not Covered		70%	65%	65%	80%	70%	70%
Relines and Repairs-to bridges, implants, and dentures	Not Covered		50%	Major Services 40%	40%	80%	70%	70%	
Endodontic Services-root canals	Not Covered		50%	40%	40%	80%	70%	70%	
Periodontic Services-to treat gum disease	Not Covered		50%	40%	40%	80%	70%	70%	
Prosthodontic Services-bridges, implants, and dentures	Not Covered		50%	40%	40%	50%	Major Services 40%	40%	
Major Restorative Services-crowns	Not Covered		50%	40%	40%	50%	40%	40%	
Orthodontic Services									
Orthodontic Services—braces							50%	50%	50%
Orthodontic Age Limit	Not Covered		Not Covered			No Age Limit			
Orthodontic Services Waiting Period						12-Month Waiting Period			
Waiting Periods									
Preventative Services Waiting Period	No Waiting Period		No Waiting Period			No Waiting Period			
Basic Services Waiting Period	No Waiting Period		No Waiting Period			No Waiting Period			
Major Services Waiting Period		Does Not Appl	ly	12-Month Waiting Period			12-Month Waiting Period		

*When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that will be paid for those services. This Nonparticipating Dentist Fee may be less than what your dentist charges, which means that you will be responsible for the difference

Preventive and Enhanced Plans Maximum Payment - \$1,000 per person total per benefit year on diagnostic & preventive, basic services, and major services.

Premium Plan Maximum Payment - \$1,500 per person total per benefit year on diagnostic & preventive, basic services, and major services. \$1,000 per person total per lifetime on orthodontics.

Deductible - \$50 deductible per person total per benefit year limited to a maximum deductible of \$150 per family per benefit year on all services except diagnostic and preventive services, emergency palliative treatment, sealants, brush biopsy, and X-rays.

Enhanced Plan Waiting Period - Preventative and basic services will be covered with no waiting periods. Major services including endodontic services, periodontic services, major restorative services, relines and repairs, and prosthodontic services will not be covered until after a person is enrolled in the dental plan for 12 consecutive months. For the initial enrollment only, the waiting periods(s) can be waived for all services if the enrollee was covered for at least 12 months under the immediately preceding dental plan.

Premium Plan Waiting Period - Preventative and basic services will be covered with no waiting periods. Endodontic Services, relines and Repairs, and Periodontic services are considered basic services under the Premier Plan and will be covered with no waiting periods

PREMIUMS (Based on age)

	Preventive Plan	Enhanced Plan
Age 0 - 18	\$24.21/month	\$38.75/month
Age 19 - 64	\$24.21/month	\$38.75/month
Age 65+	\$24.21/month	\$47.80/month

Premium Plan
\$55.04/month
\$55.04/month
\$61.00/month

FINDING A DENTIST

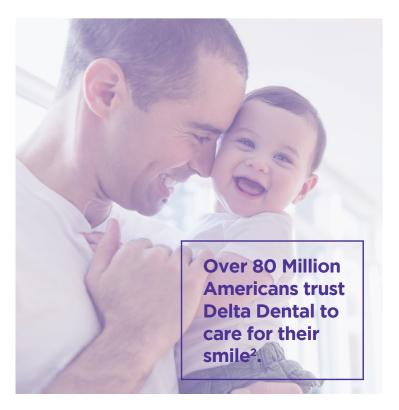
We are continuously adding dentists to our network. While you are free to visit any licensed dentist of your choice, remember that you will obtain the deepest discounts and least amount of out-of-pocket costs by choosing a dentist from the Delta Dental PPO™ network.

To find a participating dentist or to see if your current dentist is in our network, visit our website,

CUSTOMER SERVICE

We make accessing your dental insurance easy. Our Member Portal is available 24/7 and allows you to make decisions in real-time online, or on your mobile device, and provides you access to your ID card.





READY TO ENROLL, CLICK THE LINK BELOW

https://www.brotherwoodinsurance.com/dental-new

LIMITATIONS AND EXCLUSIONS

Below is a partial list of services that are not covered and limited under Delta Dental of North Carolina's Individual and Family Plans.

Refer to our website at **nc.deltadental.com/exceptionsandreductions** or your Policy (INVD-100-Delta-2020-NC) for complete exclusions, limitations and coverage details.

The Policy prevails if discrepancies are noted between this brochure and the Policy.

- Services or supplies, as determined by Delta Dental, that are investigational in nature including services or supplies required to treat complications from investigational procedures.
- Charges for failure to keep a scheduled visit with the Dentist, late payments, the completion of forms or submission of claims.
- Services or supplies, as determined by Delta Dental, which are not provided in accordance with generally accepted standards of dental practice.
- Dental procedures performed solely for cosmetic or aesthetic reasons, except when dental procedures are performed in order to restore normal function to minor children with congenital or developmental malformations.
- Services or supplies that are not clinically necessary.
- Expenses for dental procedures begun prior to the member's eligibility with Delta Dental.
- Appliances, restorations, or services for the diagnosis or treatment of disturbances of the temporomandibular joint (TMJ).
- Composite resin (white) restorations are an optional service on posterior teeth and Delta Dental will pay only the applicable amount that it would have paid for an amalgam restoration.
- Orthodontic Services are payable per person, per lifetime with the Premier plan only. Orthodontic Services are not covered under the Enhanced or Preventive plans.